



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
*Olympia, Washington 98504*

May 7, 2018

CERTIFIED MAIL # 7016 3010 0001 0575 0648

P. Blair Stam, Executive Vice President  
Signature Healthcare Services LLC  
4238 Green River Road  
Corona, California 92880

RE: Certificate of Need Application #15-15A

Dear Mr. Stam:

Thank you for agreeing to the conditions on your Certificate of Need (CN) application to construct a 105-bed psychiatric hospital in Pierce County pursuant to the settlement agreement in *Signature Healthcare Services, LLC v. Washington State Department of Health*, Pierce County Superior Court, No. 17-2-07040-3 (Settlement Agreement).

Because of the size of the construction project, the department may not issue a CN until it receives a copy of the approved Conditional Use Permit.<sup>1</sup> However, the department may commit to issue the CN if the requirements of the Settlement Agreement are met. This letter serves as that “Intent to Issue” a Certificate of Need.

The “Intent to Issue” commitment for this project is not approval for any other local, federal, or state statutes, rules, or regulations. The project may also need Department of Health approval for a construction plan and facility licensing or certification, as well as other federal or local jurisdiction permits.

Once issued, the Certificate of Need is valid for two years. The project must begin during this time. If there is substantial and continuing progress, we may extend the certificate for one six-month period. For an extension, you must submit an extension request at least 120 days before the expiration. You cannot begin a project after the expiration date.

We monitor projects until completed or the expiration date, whichever occurs last. We do this with quarterly progress reports. At least 30 days prior to the progress report’s due date, you will receive a form to complete and return.

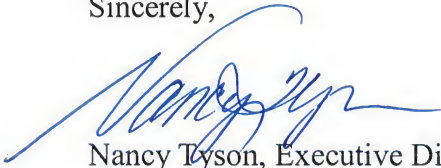
---

<sup>1</sup> WAC 246-03-030(4)

P. Blair Stam, Executive Vice President  
Signature Healthcare Services LLC  
CN Application #15-15A  
May 7, 2018  
Page 2 of 2

If you have any questions, please contact Janis Sigman with the Certificate of Need Program at (360) 236-2955.

Sincerely,

A handwritten signature in blue ink, appearing to read "Nancy Tyson", with a long, sweeping horizontal line extending to the left.

Nancy Tyson, Executive Director  
Health Facilities and Certificate of Need  
Washington State Department of Health